# F21000002201

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
Office Use Only	



06/29/21--01026--025 \*\*78.75

 $\langle \rangle$ 

2021 JUN 29 PH 2: 33

Hd 62 NOF 1202

ر. بہ m

EFFECTIVE DATE



-		3.6		
I A	L	BRI	Π	ОŅ

#### **COVER LETTER**

TO:	Amendment Section Division of Corporations			2021	•.
SUBJ	ECT: Universal North America Insurance	Company		2021 JUN 29	n N
	Name of Surviving Entity			29 PH	-
The e	nclosed Articles of Merger and fee are submitted for filing.		- ; - ;	H 2: (	л О
Please	e return all correspondence concerning this matter to following:			<u> </u>	
We	es Strickland	· /e u	żΠρ	ick	<u> </u>
	Contact Person			e l é	1.71
Со	lodny Fass	u() + i	ne t	-1 (1)	y.
	Funt/Company	Dience C	č1		
119	9 East Park Avenue	, Aren	ready	<u>с</u> Г	
	Address		Chi S Cha ê	$\boldsymbol{\zeta}$	
Tal	lahassee, FL 32301	Ne M Up H Please c Men i Fany	Than	< 5	,
	City/State and Zip Code		·		
ruri	ra@uihna.com				

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Wes Strickland

Name of Contact Person

At (<u>850</u>) <u>321-3475</u>

Area Code & Daytime Telephone Number

Certified copy (optional) \$8.75 (Please send an additional copy of your document if a certified copy is requested)

#### Mailing Address:

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

#### Street Address:

Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

IMPORTANT NOTICE: Pursuant to s.607.1622(8), F.S., each party to the merger must be active and current in filing its annual report through December 31 of the calendar year which this articles of merger are being submitted to the Department of State for filing.

## ARTICLES OF MERGER EFFECTIVE DATE

The following articles of merger are submitted in accordance with the Florida Business Corporation Act, pursuant to section 607.1105, Florida Statutes.

FIRST: The name and jurisdiction of the surviving entity:

Name	Jurisdiction	Entity Type	Document Number (If known/ applicable)
Universal North America Insurance Company	Texas	Profit Corp.	F21000002201

SECOND: The name and jurisdiction of each merging eligible entity:

Name	Jurisdiction	Entity Type	Document Number (If known/ applicable)
Universal Insurance Company of North America	Florida	Profit Corp.	P04000067181
· · · · · · · · · · · · · · · · · · ·	<u> </u>		
	<u> </u>		

THIRD: The merger was approved by each domestic merging corporation in accordance with s.607.1101(1)(b), F.S., and by the organic law governing the other parties to the merger.



#### · · ·

**FOURTH:** Please check one of the boxes that apply to surviving entity:

- This entity exists before the merger and is a domestic filing entity.
- This entity exists before the merger and is not authorized to transact business in Florida.
- This entity exists before the merger and is a domestic filing entity, and its Articles of Incorporation are being amended as attached.
- This entity is created by the merger and is a domestic corporation, and the Articles of Incorporation are attached.
- This entity is a domestic eligible entity and is not a domestic corporation and is being amended in connection with this merger as attached.
- This entity is a domestic eligible entity being created as a result of the merger. The public organic record of the survivor is attached.
- This entity is created by the merger and is a domestic limited liability limited partnership or a domestic limited liability partnership, its statement of qualification is attached.
- FIFTH: Please check one of the boxes that apply to domestic corporations:
- The plan of merger was approved by the shareholders and each separate voting group as required.
- The plan of merger did not require approval by the shareholders.
- SIXTH: Please check box below if applicable to foreign corporations
- The participation of the foreign corporation was duly authorized in accordance with the corporation's organic laws.

SEVENTH: Please check box below if applicable to domestic or foreign non corporation(s).

Participation of the domestic or foreign non corporation(s) was duly authorized in accordance with each of such eligible entity's organic law.

**<u>EIGHTH</u>**: If other than the date of filing, the delayed effective date of the merger, which cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State:

### June 30, 2021

<u>Note:</u> If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

<b><u>NINTH</u></b> : Signature(s) for Each Party:	$\circ$	<b>m</b>
Name of Entity/Organization:	Signature(s):	Typed or Printed Name of Individual:
Universal North America Insurance Company	( · vinfille	Miguel A. Borroles
Universal Insurance Company of North America	Sector arsa	Richars J. Urra
	<u> </u>	

Corporations:

General partnerships: Florida Limited Partnerships: Non-Florida Limited Partnerships: Limited Liability Companies: Chairman, Vice Chairman, President or Officer (If no directors selected, signature of incorporator.) Signature of a general partner or authorized person Signatures of all general partners Signature of a general partner Signature of an authorized person

.